



# VIRGINIA DEPARTMENT OF SOCIAL SERVICES



## **Virginia's Three Branch Institute**

**Carl E. Ayers, Director**  
**Division of Family Services**

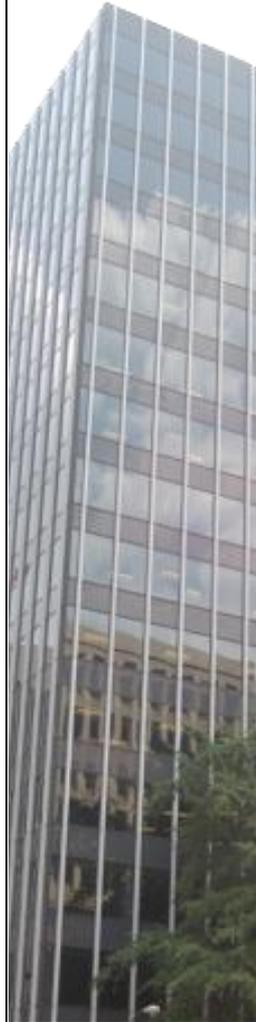
April 17, 2017

*People helping people triumph over poverty, abuse and neglect  
to shape strong futures for themselves, their families and communities*

# Agenda Highlights



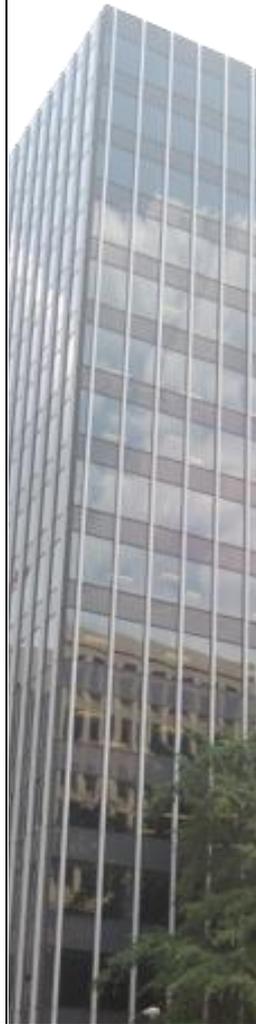
- VDSS & Three Branch Institute Overview
- Child Fatalities: Data, CPS Response & Review Team Structure
- Virginia's Proposal Overview & Discussion



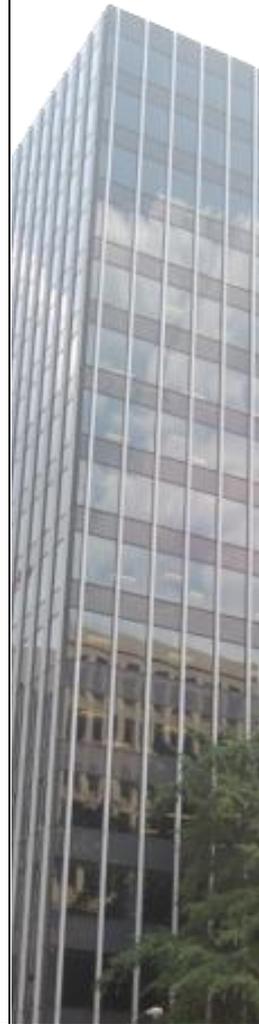
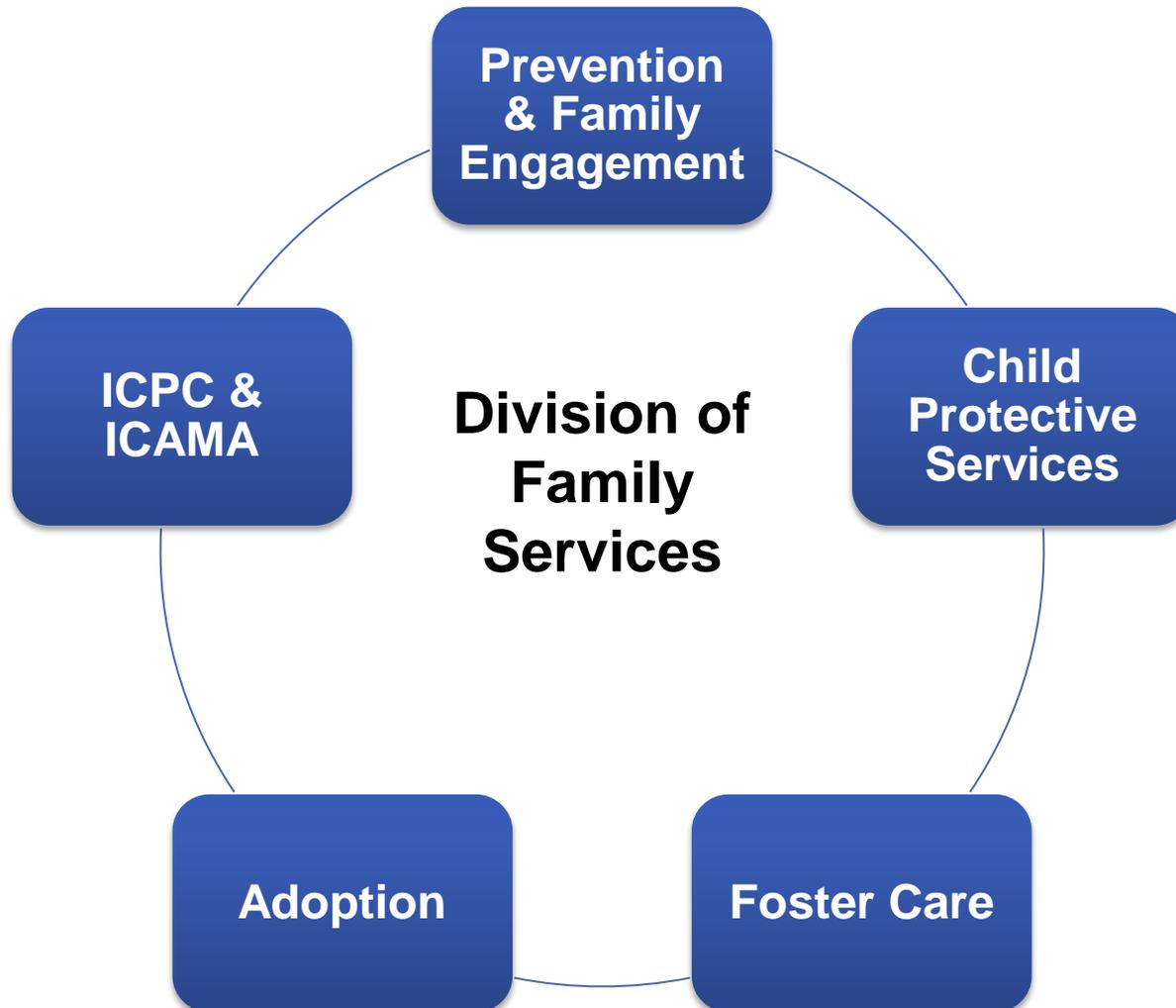
# VDSS Structure



- State-supervised and locally-administered system that serves over 1.6 million people annually
- Includes Home Office in Richmond, five regional offices and 120 local departments of social services
- VDSS receives federal and state funds and allocates them to local departments of social services to operate their programs



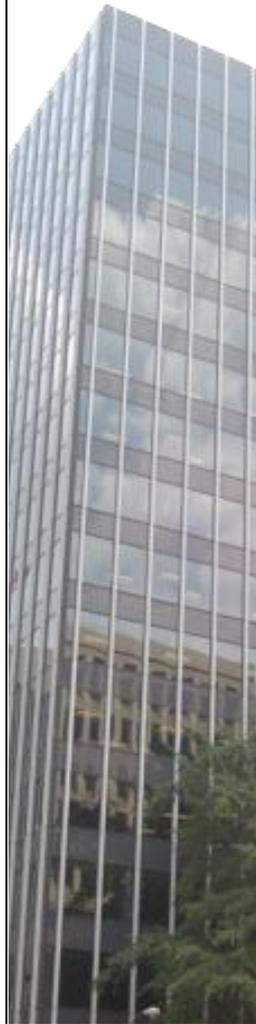
# Division of Family Services Program Overview



# National Governors Association Overview



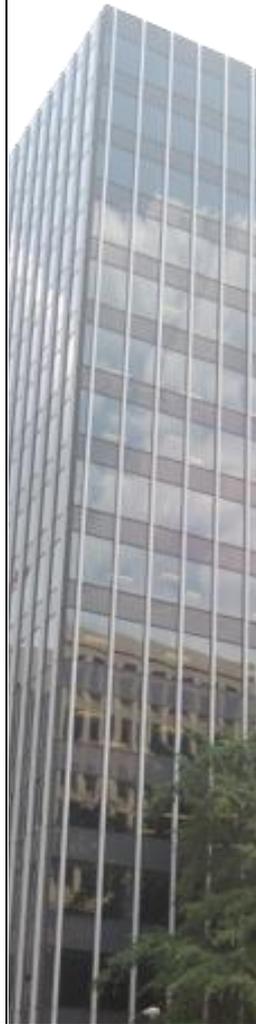
- NGA is a bipartisan organization comprised of that nation's governors
- Purpose is to share best practices, identify priority issues and deal collectively with matters of public policy and governance at the state and national levels



# Three Branch Institute Overview



- Partnership between NGA and the National Conference of State Legislatures
- Designed to bring the three branches of government together to develop an action plan to address the most pressing child welfare issues
- Accomplished through a national convening of all the teams as well as regular in-state meetings
- Previous Virginia Three Branch participation took place 2013 and 2014 and focused on child social and emotional well-being

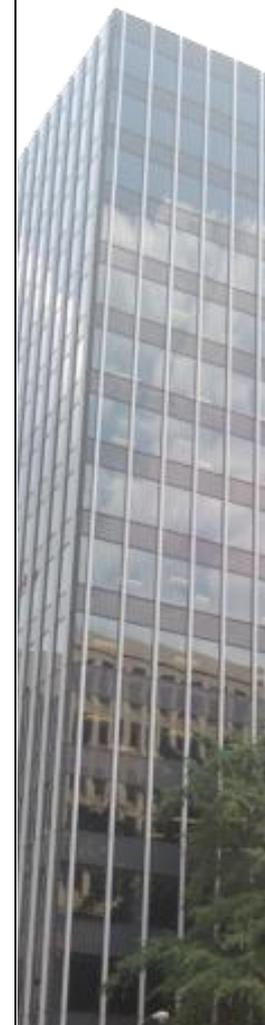


# 2016 Focus: Improving Child Safety and Preventing Child Fatalities

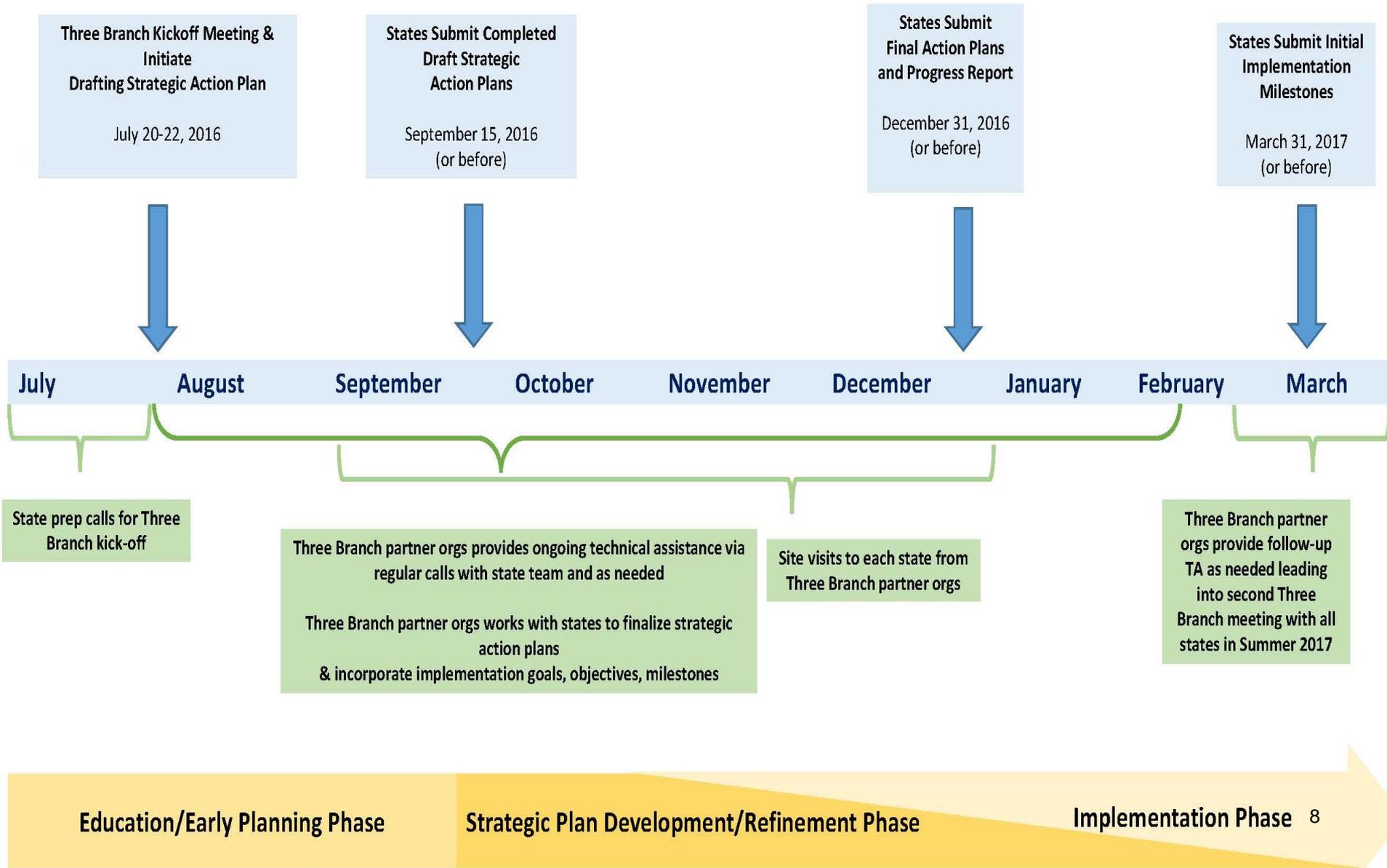


- Purpose: To develop an integrated and comprehensive approach for improving the safety of children known to the child welfare system or at risk of child welfare involvement
- 20 month engagement with customized technical assistance and on-site consultation from NGA beginning in July 2016

Selected States		
Alabama	Kentucky	Maryland
Oregon	Tennessee	Virginia
West Virginia	Wisconsin	

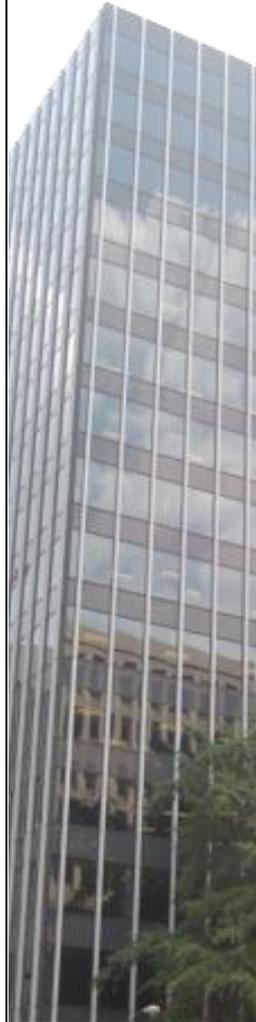


# Three Branch Institute: Timeline of Activities





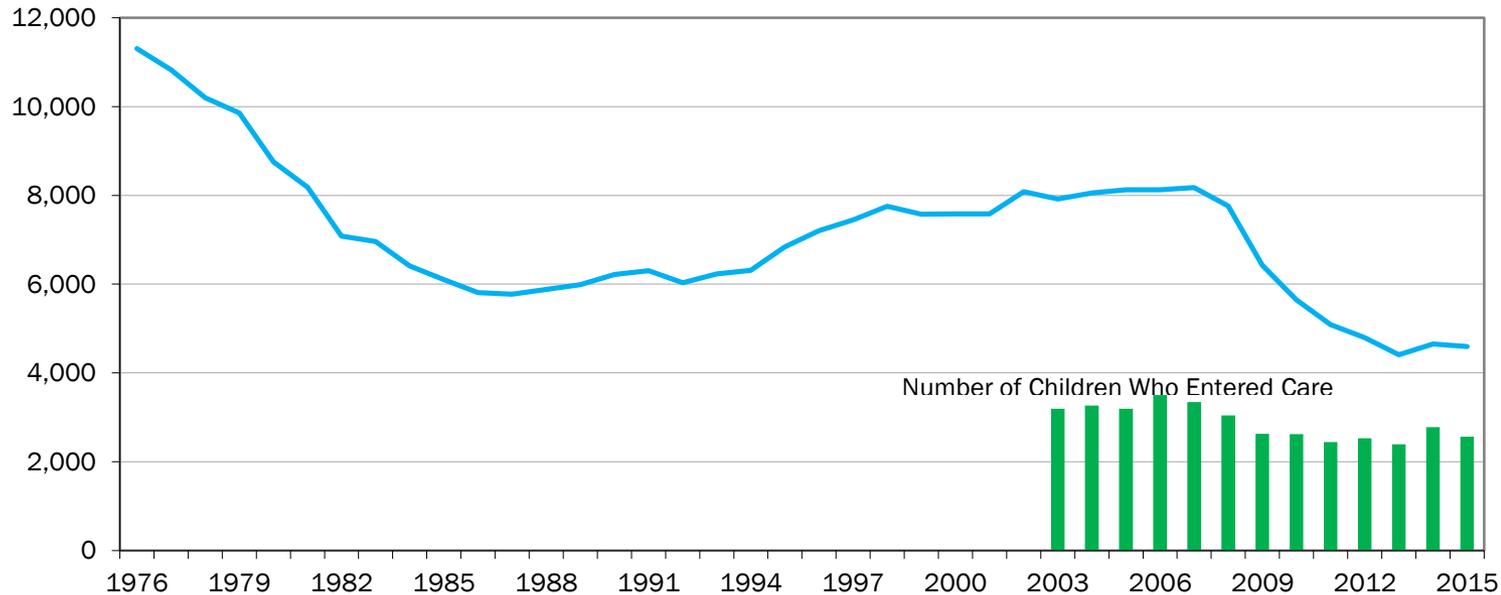
# **Child Fatalities: Data, CPS Response & Review Team Structure**



# Child Welfare Trends



Number of Children in Foster Care  
(Under 18 years-old)



As of 6/1/2016, there were **5,326** children in foster care. During SFY 2015, there were **2,568** children who entered the foster care system.

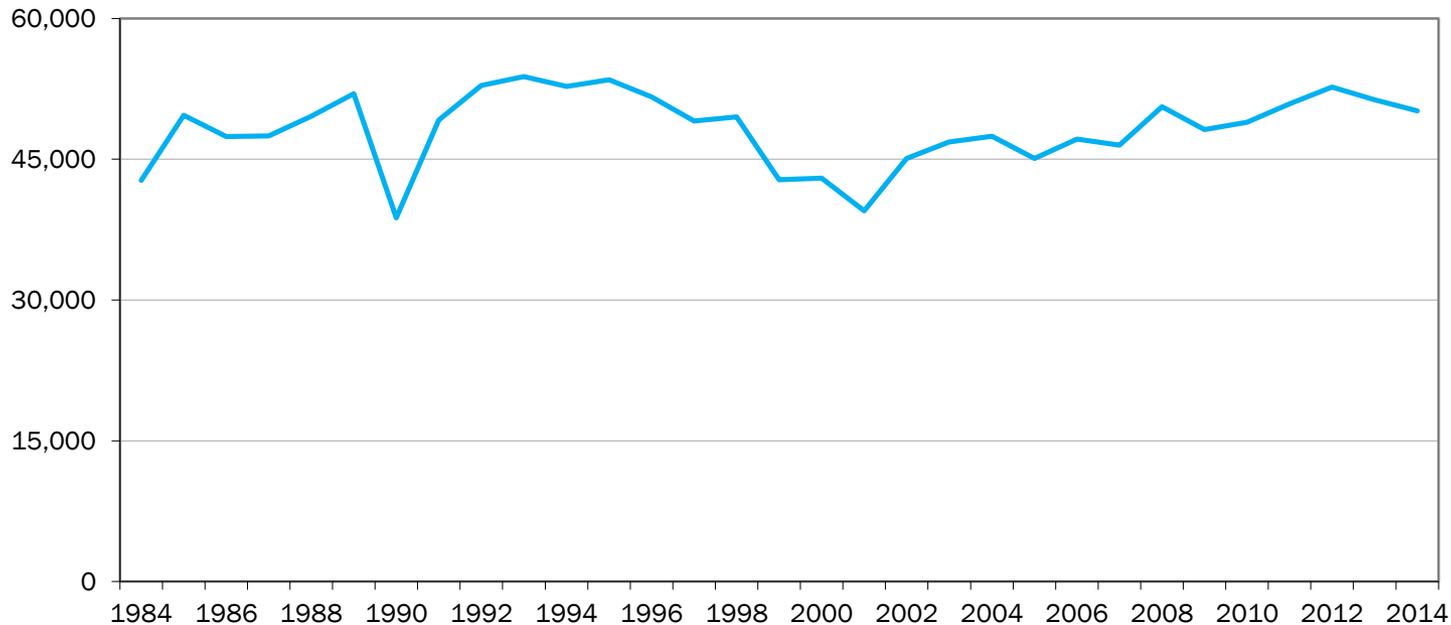
- **5%** are under 1
- **24%** are ages 1-5
- **16%** are ages 6-9
- **28%** are ages 10-15
- **23%** are ages 16-18

Source: Virginia Child Welfare Outcome Reports (VCWOR), OASIS Rolling Year Data, "Children in Care on Last Day (raw data)"; OASIS IV-E Foster Care Penetration Rate report; VCWOR, OASIS Rolling Year Data, "Length of Stay in Foster Care"; and Division of Family Services, Foster Care Program staff.

# Child Welfare Trends



## Number of Reported Child Victims in Completed CPS Reports



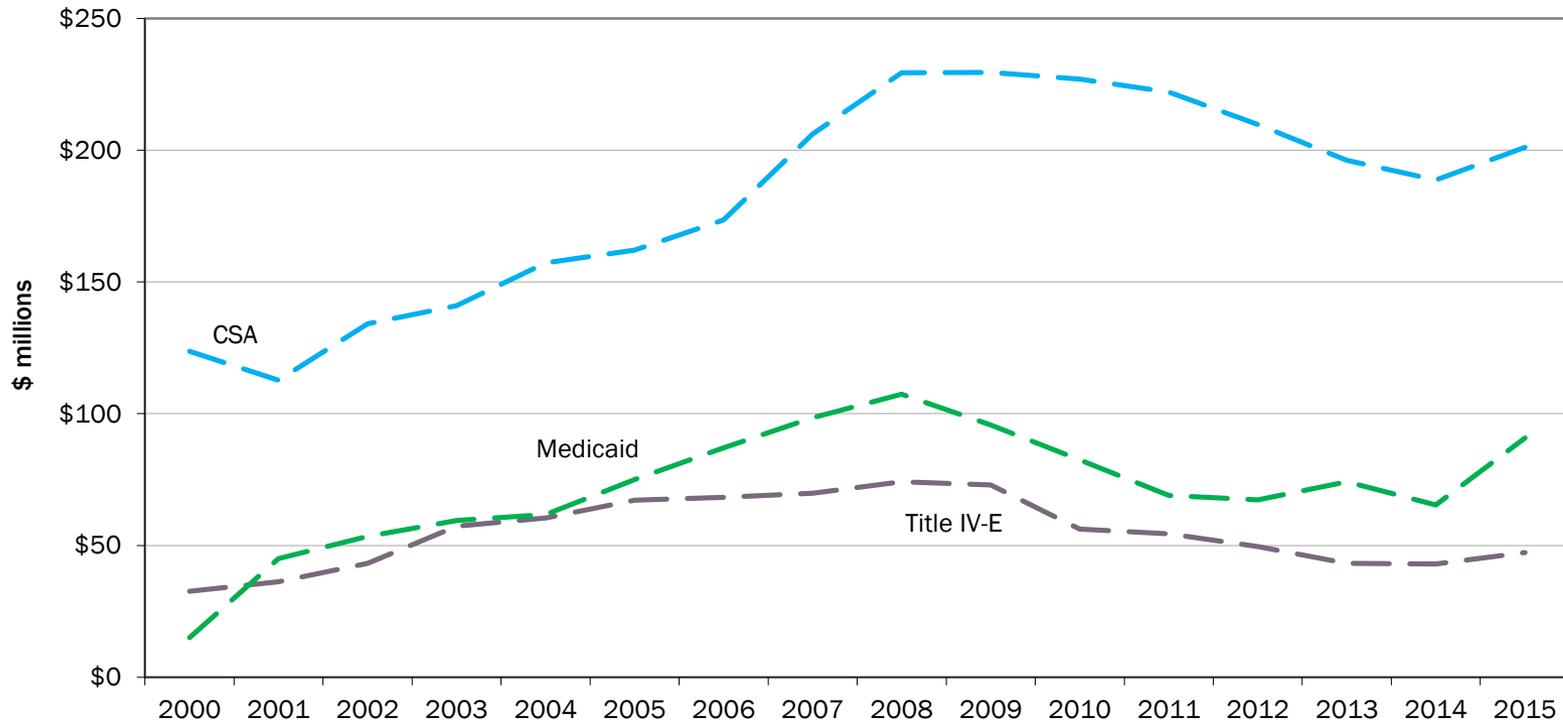
During State Fiscal Year (SFY) 2015, there were **49,868** children reported as possible victims of abuse or neglect. There were **6,592** children with “founded” investigations.

- **56%** Physical Neglect
- **26%** Physical Abuse
- **11%** Sexual Abuse
- **3%** Mental Abuse/Neglect
- **2%** Medical Neglect

# Child Welfare Financial Trends



Foster Care Expenditures  
Title IV-E, Comprehensive Services Act (CSA), and Medicaid



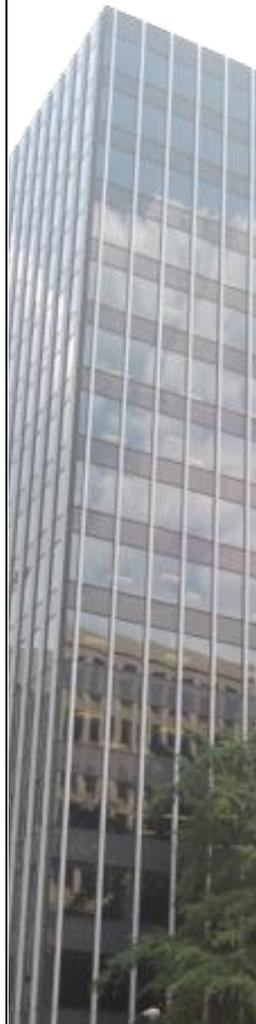
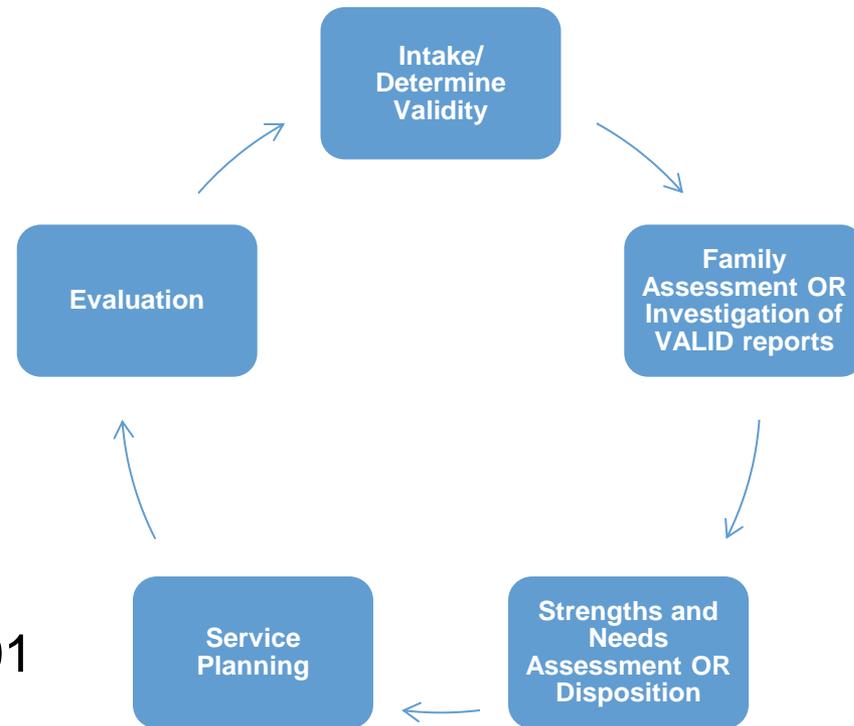
For SFY 2015, the average annual expenditures per foster child were **\$46,723**.

Sources: Division of Family Services, Foster Care Program staff; Division of Finance (LASER), and Office of Comprehensive Services Fiscal staff. CSA expenditures are from an internal document, "Statewide Summary of Census and Expenditures," [http://www.csa.virginia.gov/publicstats/csa\\_pool.cfm](http://www.csa.virginia.gov/publicstats/csa_pool.cfm) and Medicaid expenditures from "Medicaid Payment by Month," found at "[www.csa.state.va.us/html/statewide\\_statistics/medicaid.cfm](http://www.csa.state.va.us/html/statewide_statistics/medicaid.cfm)."



# CPS Purpose & Process

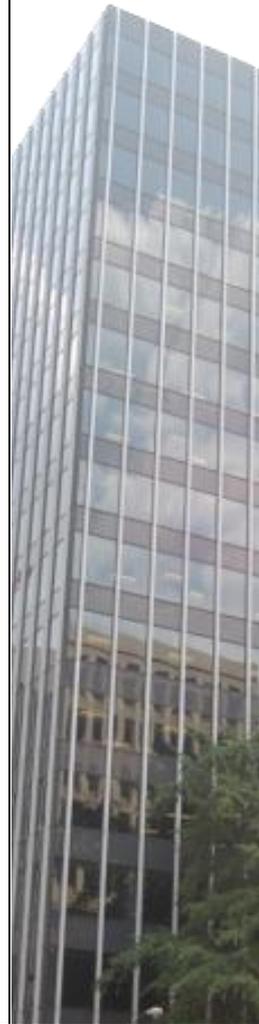
- Identify, assess and provide services to children and families
- Protect children, preserve families and prevent further maltreatment
- Legal authority
  - CAPTA 42 U.S.C. 5101 et seq.
  - Code of Virginia, 63.2-1500 et seq.



# FY2016 Child Fatalities: Preliminary Report Overview



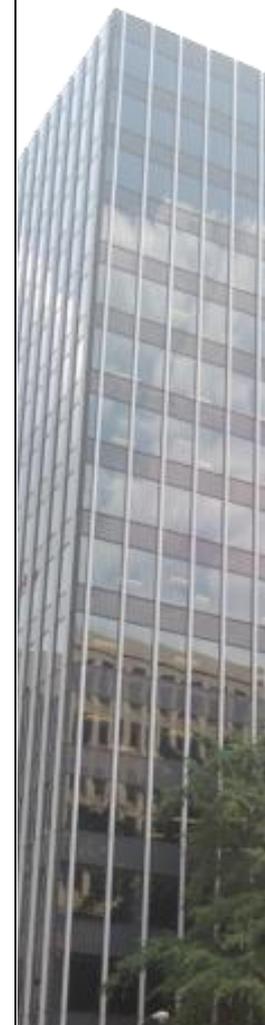
- LDSS investigated 127 reports involving 131 child deaths suspected to be caused by child maltreatment in SFY2015
- Findings showed 52 children died as a result of child abuse or neglect; 72 reports were unfounded and 7 are still pending or have been appealed.
- Virginia's child death rate has increased (1.8 in 2013 vs. 2.8 in 2015) while that national death rate has remained almost the same (2.2 in 2013 to 2.1 in 2015)
- Historically, Virginia's rate of founded child maltreatment deaths has been equal to or slightly lower than the national average until 2014



# Virginia's Child Maltreatment Death Rate



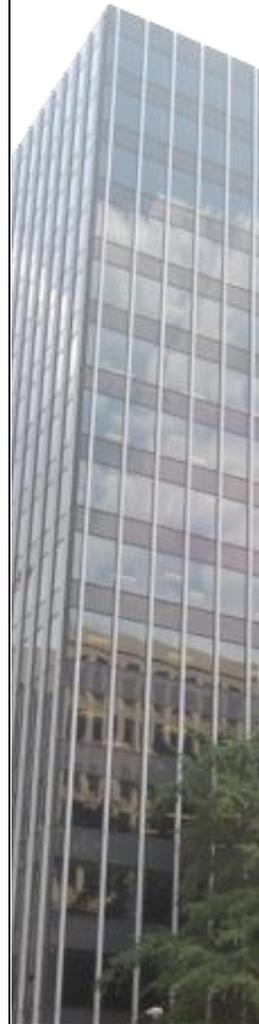
State Fiscal Year	Number of Death Reports Investigated	Number of Deaths Due to Abuse/Neglect	Death Rate (per 100,000 children)
2005	56	27	1.3
2006	54	29	1.4
2007	60	29	1.4
2008	74	35	1.7
2009	72	34	1.7
2010	78	44	2.4
2011	86	30	1.6
2012	107	37	2.0
2013	106	33	1.8
2014	124	47	2.5
2015	131	52	2.8



# Child Death Investigations and Outcomes by Region



Region	Investigated	Founded	Unfounded	Pending or Appeal
Eastern	46	12	34	0
Central	18	8	7	3
Piedmont	25	12	13	0
Northern	27	8	16	3
Western	15	12	2	1
<b>Total</b>	<b>131</b>	<b>52</b>	<b>72</b>	<b>7</b>

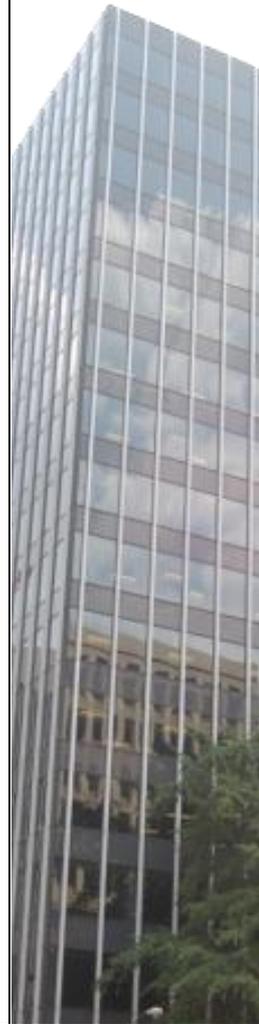


# Child Death Rate by Region



*\* State average 2.5 per 100,000 children*

Region	Deaths	Per 100,00
Eastern	12	2.9
Central	8	2.7
Piedmont	12	5.1
Northern	8	.9
Western	12	10.8

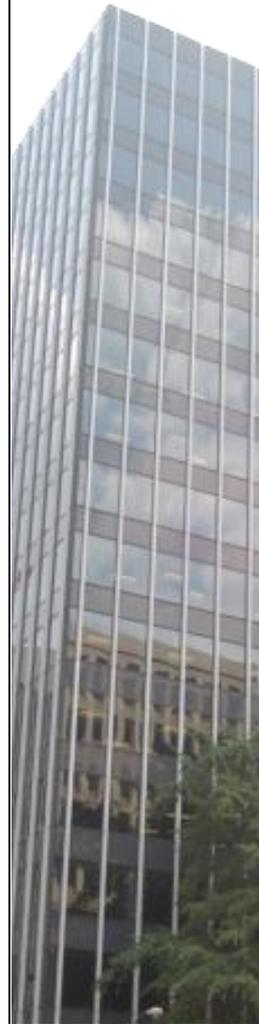




# Who are the children?

Age	Number	Percent
Birth to 12 months	22	42.3
13 months to 3 years	20	38.5
4 to 7 years	7	13.5
8 to 12 years	3	5.8
13 years +	0	0.0
Total	52	100

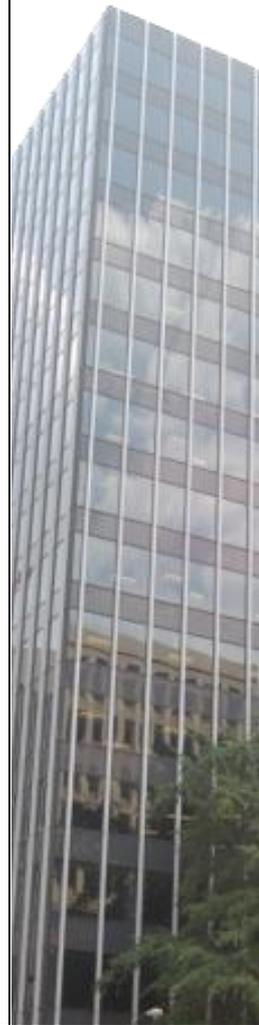
- 53.8% were female and 46.2% were male
- 32.7% were African-American, 65.4% were White, and 1.9% were Multi-Racial



# Who are the caretakers?



Caretaker Type	Number	Percent
Mother	25	41.7
Father	16	26.7
Uncle/Aunt	2	3.3
Grandparent	1	1.7
Paramour	6	10.0
Child Care Provider	4	6.7
Foster Parent	1	1.7
Legal Guardian	1	1.7
Other Adult in the Home	1	1.7
Unknown	3	5.0
Total	60	100

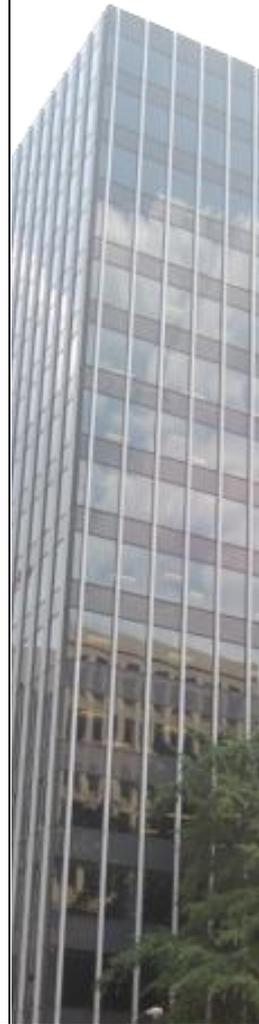




# Who are the caretakers?

Age Category	Number	Percent
Under 20 years	4	6.7
20 to 29 years	23	38.3
30 to 39 years	19	31.7
40 to 49 years	7	11.7
50 or older	3	5.0
Unknown	4	6.7
<b>Total</b>	<b>60</b>	<b>100.0</b>

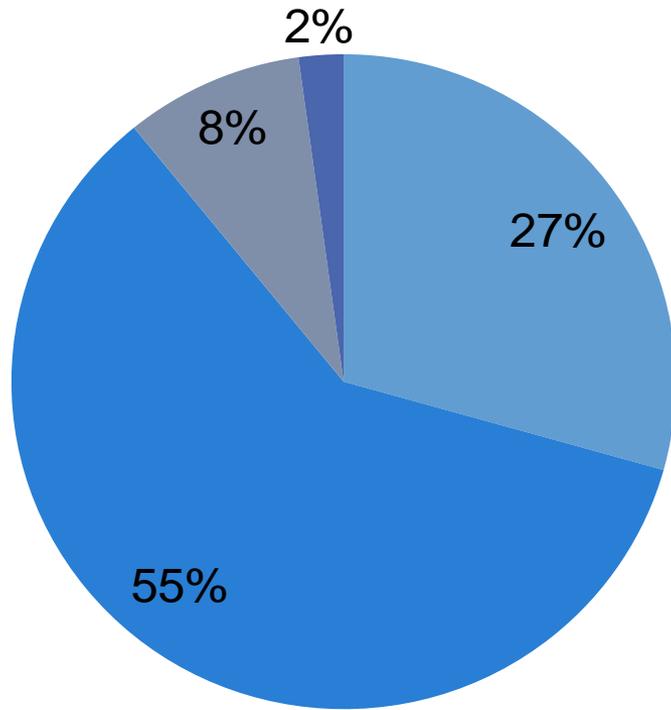
- Primary caregivers were:
  - Employed (55%)
  - Unemployed (36%)
  - Receiving social services (54%)
  
- High-risk indicators include:
  - Prior history of child abuse/neglect
  - Intimate partner violence
  - Substance abuse history
  - Criminal history or delinquency
  - Disability or chronic illness



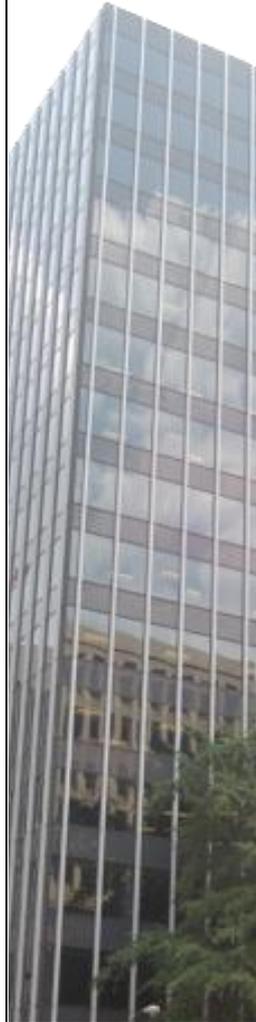
# Types of Abuse and Neglect



**Maltreatment Category**



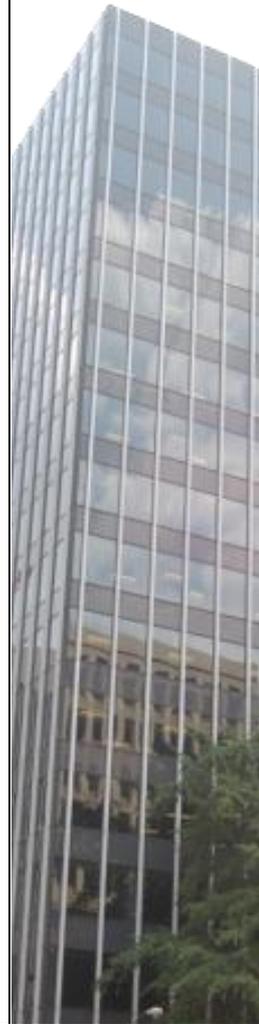
- Physical Abuse
- Physical Neglect
- Physical Abuse and Physical Neglect
- Medical Neglect



# Child Maltreatment History



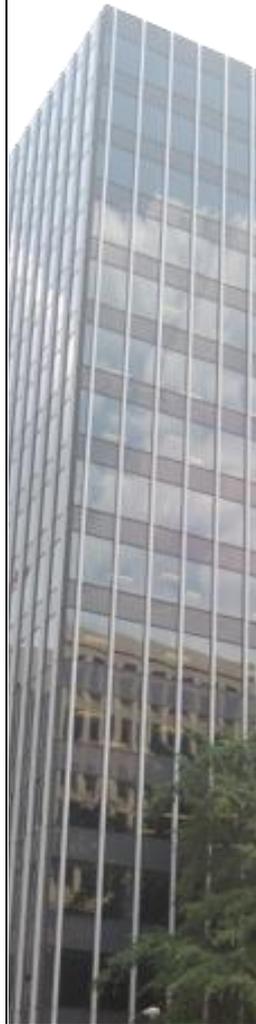
Prior Abuse/Neglect	Number	Percent
Yes	16	33.3
No	32	66.7
Total	48	100.0



# What about the unfounded cases?

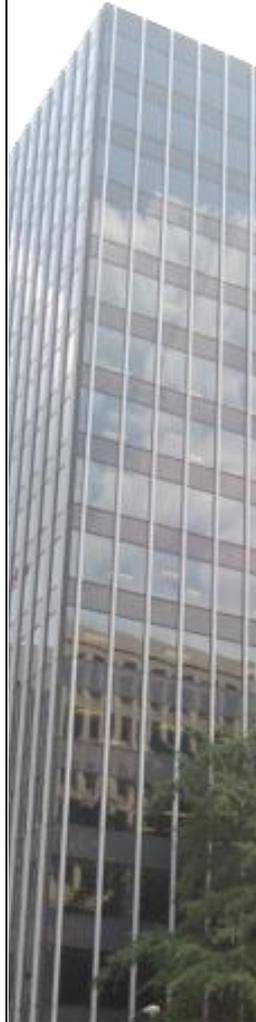


- 52 of 72 (72%) involved a child under one year of age
- 46 of 72 (64%) were related to the sleep environment
- Most unfounded deaths involved unsafe sleep environments





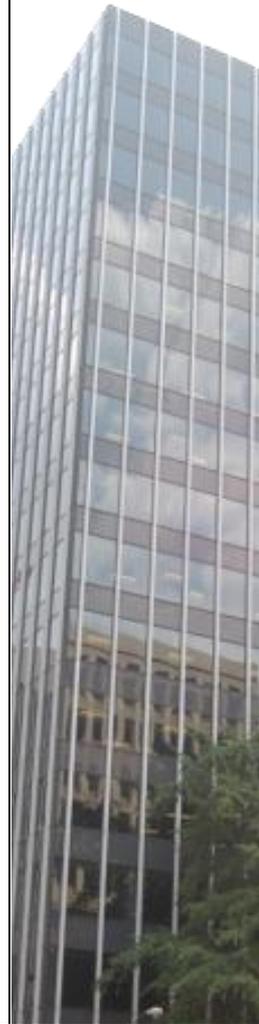
# Virginia's Three Branch Work Plan





# Child Fatality Review Teams

- Two types: States and Regional
- Purpose: To systematically analyze child deaths (homicides, unexpected or unexplained) and make recommendations for prevention, intervention and improved investigations
- **State Child Fatality Review Team**
  - Established in 1994
  - Chaired by Chief Medical Examiner
  - Multidisciplinary and topic-focused
- **Regional Child Fatality Review Teams**
  - Established five teams in 2012
  - Review all child deaths investigated by LDSS
  - Seek to understand the specific circumstances surrounding each death

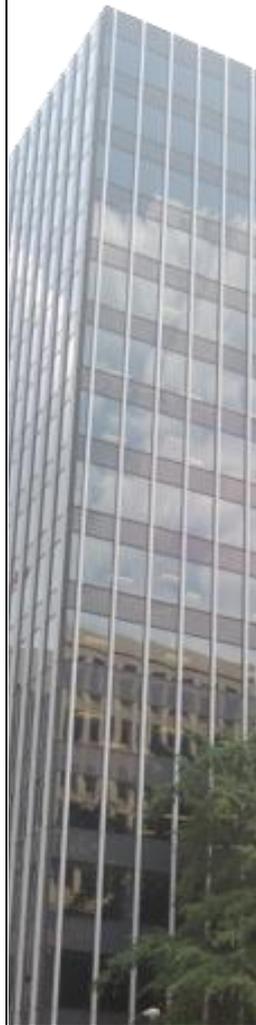


# Work Plan Focus



Efforts will be focused on children **under the age of four**, with a special focus on children **under the age of one**, and include four goals:

1. Increase understanding of risk and protective factors that are predictive/associated with child maltreatment and child fatalities
2. Assess the effectiveness of existing screening, safety and risk tools and explore the development of new or expanded policies, practices and protocols
3. Strengthen existing efforts to improve child welfare practice through primary prevention and family engagement strategies
4. Enhance child welfare recruitment and retention efforts to create and sustain a culture of safety in the workplace.





# Work Plan Focus

## Predictive Analytics

- Conduct an analysis of various child, family and community factors
- Develop risk and asset profiles by region and locality

## Safety, Assessment & Identifying the At-Risk Population

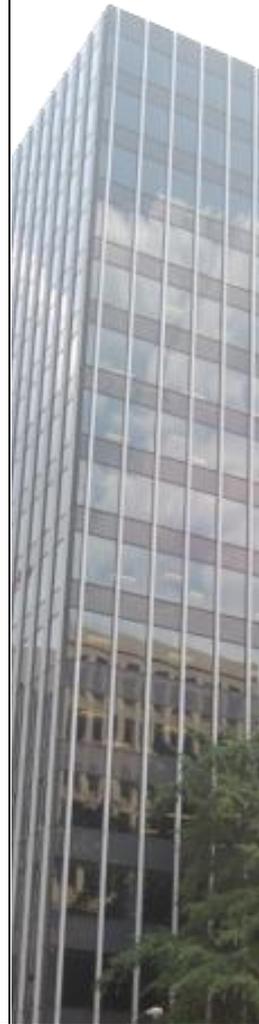
- Pilot automatic investigations for children under 1
- Pilot automatic investigations for all high risk reports (R1s) for children under 4
- Pilot the SDM Reunification tool for children under 4 who have a goal of reunification
- Conduct another assessment of the SDM Intake, Safety and Risk tool

## Primary Prevention & Family Engagement

- Build upon existing work with Practice Profiles to promote a shared family engagement philosophy
- Enhance coordination and promotion of primary prevention strategies among law enforcement, courts, and the medical profession within an established quality practice framework

## Enhance Child Welfare Recruitment and Retention Efforts

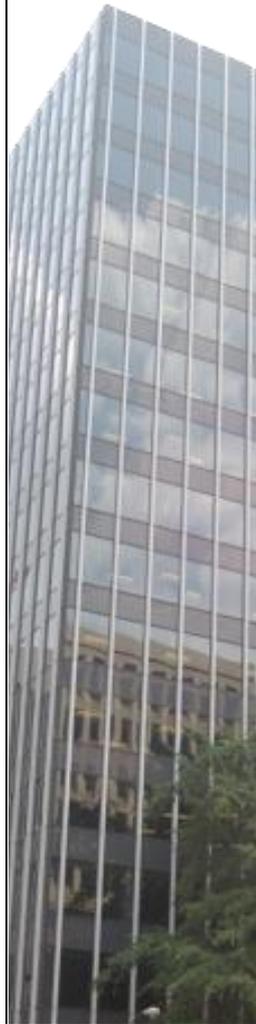
- Complete a mandated training analysis
- Implement complement of training courses required to be completed by June 30, 2017
- Apply for a five-year opportunity with the federal Quality Improvement Center for Workforce Development to implement strategies to address recruitment and retention
- Statewide rollout of the Child Welfare Stipend Program



# Progress



- Collective impact model for responding to child fatalities has been highly successful
- Changes to how we respond to Substance Exposed Infants
- 24-hour response time to valid CPS complaints involving children under the age of two
- Completing data matches across all child fatalities, not just those investigated by LDSS
- In the second phase of a national grant application to the Quality Improvement Center for Workforce Development to address child welfare workforce and turnover issues
- Working on a statewide safe sleep campaign and a statewide roll-out of baby boxes and two pilot safe sleep programs utilizing baby boxes and home visiting programs



# Baby Boxes and Safe Sleep Education



<http://www.babyboxuniversity.com/>

<http://abcnews.go.com/GMA/video/jersey-offer-baby-boxes-parents-45084761>

<http://www.babyboxco.com/blogs/news/how-to-get-your-ohio-baby-box-in-5-easy-steps>

